

1. A method of treating pathogenic polyclonal B cell activation or class switching in a patient, the method comprising:

administering to said patient an effective dose of a CD1 blocking agent, wherein said blocking agent is characterized as interfering with T cell recognition of CD1 and is inhibitory of CD1 signaling;

wherein said dose is effective to treat the symptoms of said polyclonal B cell activation or class switching.

2. The method according to Claim 1, wherein said pathologic polyclonal B cell activation or class switching results in systemic lupus erythematosus.

The method according to Claim 2, wherein said CD1 blocking agent is a glycolipid or phospholipid.

- 4. The method according to Claim 2, wherein said CD1 blocking agent is a polypeptide.
- 5. The method according to Claim 4, wherein said polypeptide is an antibody or fragment thereof.
- 6. The method according to Claim 5, wherein said antibody is a monoclonal antibody.
- 7. The method according to Claim 6, wherein said monoclonal antibody is a human or humanized antibody.
- 8. The method according to Claim 7, wherein said monoclonal antibody specifically binds to human CD1d.
 - 9. The method according to Claim 7, wherein said monoclonal antibody binds to

multip human CD1 isotypes.

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of monoclonal antibodies that bind to multiple human CD1 isotypes.

The method of Claim 4, wherein said polypeptide is soluble CD1 or a glycolipid bound to CD1.

12. The method according to Claim 2, wherein said administration is by intravenous injection.

13. A method according to Claim 2, further comprising administering to said patient a second therapeutic agent for the treatment of systemic lupus erythematosus.

The method according to Claim 4, wherein said polypeptide is a soluble T cell antigen receptor.